

<u> </u>					Customized P	TO/SB/21 (1-08)
.\$		Applicati		10/507,	258	
TRANSMITTAL FORM		Confirmati		4864		
		Filing I				
		First Inve		PEZZOTTI		
(for all correspondence after initial filing)		Art	Unit	1797		
		Exam	niner			
Total number of pages in this submissi	Dock	ket#	P09409US00/DEJ			
		_		-		
ENC	LOSURE	S (check a	ll that a	apply)		
 ⊠ Fees calculated below ⊠ Response to Restriction □ including Attachment(s) □ After Final Amendment/Reply □ including Attachment(s) ⊠ Extension of Time Petition (2 months) 		Reply to Missing Parts/Incomplete Application Certified Copy of Priority Document(s) Information Disclosure Statement Drawing(s) Terminal Disclaimer				
FEES CALCULATION: For claims if r	equired an	d/or other fe	es as	shown	below:	
Now	NOW Previously Pa		Prese	ent Extra	Rate	<u>\$</u>
☐ TOTAL CLAIMS 57			. 1000		X \$ 50 =	_
☐ INDEPENDENT CLAIMS 6		- 6			X \$ 210 =	
		Тот	AL OF	ABOVE C	CLAIMS FEES =	
Reduction by ½ for small entity	status of	applicant			•	
SUBTOTAL =						
□ Fee for extension of time (per attached Petition)						460.
Other fee for		,				
TOTAL OF ALL FEES						460
!				TOTAL	ALL I EES -	4,00
 ☑ Payment of \$ 460 is made by: ☑ CREDIT CARD PAYMENT FO ☑ ELECTRONIC FUNDS TRANS ☑ The Director is authorized to charg to Deposit Account No. 12-0555: (1) if no payment or an insufficient 	FER - subre any fee, a	mitted concu	irrently or exte	y herewi ension fee	th. e due in connect	
(2) if no petition for extension of tir hereby petitions under 37 CFR to render this submission timely	ne is enclos 1.136(a) for	sed but an EC ran extensior	OT is re	equired - ne of as n	and in this event nany months as	t, applicant
Date: June 11, 2008		<u>ک</u> مرب y Name: 🛭 d Registrati	gleen	یل کے یا	reken	

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